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## **REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY** AND

•	Application Number	08/941,605/; 6,337,114	
	Filing Date	9/30/1997/1/8/2002	
	First Named Inventor	Eric Wood	
	Art Unit	1722	•
	Examiner Name	S Nolan	
	Attorney Docket Number	<del>                                      </del>	

**CHANGE OF CORRESPONDENCE ADDRESS** 

I hereby revoke all previous powers of attorney given in the above-identified application.				
A Power of Attorney is submitted herewith.				
OR				
✓ I hereby appoint the practitioners associated with the	Customer Number: 32361			
✓ Please change the correspondence address for the above-identified application to:				
The address associated with Customer Number:	32361			
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l am the:				
Applicant/Inventor.				
Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)				
SIGNATURE of Applicant or Assignee of Record				
Signature Office -				
Name David F. Morris				
Date May 8, 2008	Telephone 036-530-80 <b>0</b> 0			
NOTE: Signatures of all the inventors or essignees of record of the entire interest or their raprasantative(s) are required. Submit multiple forms if more than one signature is required, sae below.				
*Total offorms are submitted.	*Total offorms are submitted.			

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